

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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1. Identifying information.

2. The work under consideration for publication.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.

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Section 1. Identifying Information

1. Given Name (First Name) Xu-Heng	2. Surname (Last Name) Chiang	3. Date 18-November-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jang-Ming Lee
5. Manuscript Title Hiatal repair in Ivor Lewis minimally invasive esophagectomy: a case report		
6. Manuscript Identifying Number (if you know it)		

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Dr. Chiang has nothing to disclose.

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1. Given Name (First Name) Ke-Cheng	2. Surname (Last Name) Chen	3. Date 18-November-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jang-Ming Lee
5. Manuscript Title Hiatal repair in Ivor Lewis minimally invasive esophagectomy: a case report		
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Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

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Section 1. Identifying Information

1. Given Name (First Name) Pei-Ming	2. Surname (Last Name) Huang	3. Date 18-November-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jang-Ming Lee
5. Manuscript Title Hiatal repair in Ivor Lewis minimally invasive esophagectomy: a case report		
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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Huang has nothing to disclose.

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1. Given Name (First Name) Pei-Wen	2. Surname (Last Name) Yang	3. Date 18-November-2019
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jang-Ming Lee
5. Manuscript Title Hiatal repair in Ivor Lewis minimally invasive esophagectomy: a case report		
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Section 1. Identifying Information

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4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Jang-Ming Lee
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Jang-Ming

2. Surname (Last Name)

Lee

3. Date

18-November-2019

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Hiatal repair in Ivor Lewis minimally invasive esophagectomy: a case report

6. Manuscript Identifying Number (if you know it)

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Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

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Dr. Lee has nothing to disclose.

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